

**REPUBLIC OF THE PHILIPPINES**  
**CITY OF TARLAC**  
**OFFICE OF THE BUILDING OFFICIAL**  
**APPLICATION FOR SERVICE CONNECTION**  
**(Electric Meter Connection)**

Control No. \_\_\_\_\_

Paid Under O.R. No. \_\_\_\_\_  
 Amount P \_\_\_\_\_ Date \_\_\_\_\_

Building Permit No. \_\_\_\_\_ Date Issued \_\_\_\_\_  
 Occupancy Permit No. \_\_\_\_\_ Date Issued \_\_\_\_\_

<b>NAME OF OWNER/APPLICANT</b>		LAST NAME	FIRST NAME	MIDDLE NAME
<b>ADDRESS:</b>	NO.	STREET	BARANGAY	CITY/MUNICIPALITY
<b>LOCATION OF INSTALLATION:</b>	NO.	STREET	BARANGAY	CITY/MUNICIPALITY
<b>TYPE OF OCCUPANCY USE:</b>				
<input type="checkbox"/> RESIDENTIAL DWELLING <input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL		<input type="checkbox"/> INSTITUTIONAL <input type="checkbox"/> OTHERS _____
<b>DESCRIPTION OF SERVICE:</b>				
		VOLTAGE	CIRCUITS	
<b>MAIN DISCONNECTING MEANS:</b>			<b>SERVICE ENTRANCE CONDUCTOR</b>	
<b>NUMBER OF OUTLETS:</b>				
_____ LIGHT	_____ SPO, COOKING UNIT	_____ TOGGLE SWITCH	_____ FA DETECTORS	
_____ CONVENIENCE/RECEPTACLE	_____ SPO, WATER HEATER	_____ BELLS/BUZZER	OTHERS: (See Attached List)	
_____ SPO, AIRCON	_____ SPO, WATER PUMP	_____ PUSH BUTTON		
<b>TYPE OF INSTALLATION:</b>				
<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> NEW	<input type="checkbox"/> REMODEL/ ALTERATION	<input type="checkbox"/> EXISTING
<b>TYPE/S OF WIRING:</b>				
<input type="checkbox"/> OPEN WIRING		<input type="checkbox"/> CONDUITS	<input type="checkbox"/> CABLE	<input type="checkbox"/> ARMORED CABLE <input type="checkbox"/> RACEWAYS
This is to certify that the electrical installation of the type of occupancy or use described above has been completed in accordance with the attached plan and in conformity with the provisions of the Philippines Electrical Code. This certifies further that the load specified above are true and correct to the best of my knowledge and belief and same is now ready for inspection.				
<b>PERSON-IN-CHARGE OF INSTALLATION</b>				
<input type="checkbox"/> PROFESSIONAL ELECTRICAL ENGINEER		<input type="checkbox"/> REGISTERED ELECTRICAL ENGINEER		<input type="checkbox"/> REGISTERED MASTER ELECTRICIAN (Not exceeding 800 Volts & 500 kVa)
NAME			PRC REG. NO.	
SIGNATURE		DATE ISSUED	VALIDITY	
ADDRESS				
P.T.R. No.		DATE ISSUED	PLACE ISSUED	
C.T.C No.		DATE ISSUED	TIN	
<b>CONFORME</b>				
<b>NAME OF OWNER/APPLICANT</b>		<b>SIGNATURE</b>	<b>TIN</b>	<b>CTC NO.</b>
				DATE ISSUED _____ PLACE ISSUED _____

\_\_\_\_\_ Date

**CERTIFICATE OF INSPECTION**

This is to certify that the type of occupancy or use described above has been inspected by the City Engineer's Office Authorized Representative, and found to be in conformity with the National Building Code, and to existing City Ordinances. In view of which the same is hereby recommended for electrical power service connection.

**INSPECTED BY:**

**APPROVED BY:**

\_\_\_\_\_  
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<b>OFFICE OF THE BUILDING OFFICIAL</b> TARLAC CITY SERVICE CONNECTION PERMIT	
Control No.	_____
Date Issued	_____
Issued By	_____

**JESUS P. CAWIGAN, JR.**  
 Building Official